Issue Classification										

Application No.	Applicant(s)							
09/828,573	DUVVURU, RAMESH							
Examiner	Art Unit							
Angel L Casiano	2182							

					IS	SUE C	LASSIF	ICATIO)N								
			ORIC	INAL				CRO	SS REFERENC	E(S)							
	CLA	SS		SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)											
	710 33			710	30	34	52	58									
	NTEF	RNAT	IONAL	CLASSIFICATION	370	470											
G	o	6	F	13/00	709	236											
				13/14													
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(Anger Casiano 01/18/2005 (Assistant Examiner) (Date)				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	/	KIM H	JYNH	Total Claims Allowed: 15								
	(Legal Instruments Examiner) (Date)					1/	RIMARY E	XAMINER () (D)	O.G. Print Claim(s)	O.G. Print Fig.							

	laims	s renumbered in the same order as presented by applicant						☐ CPA			□ T.D.			☐ R.1.47					
Final	Original		Final	Original		Final	Original		Final	Original		Final	Original		Final	Original		Final	Original
1	1			31			61]		91			121			151			181
2	2			32			62			92			122			152			182
3	3			33			63			93			123			153			183
	4			34			64]		94			124			154			184
4	5			35			65			95			125			155			185
5	6			36			66			96			126			156			186
6	7			37			67			97	'		127			157			187
7	8			38			68			98			128			158			188
8	9			39			69]		99			129			159			189
9	10			40			70]		100			130			160			190
10	11			41			71			101			131	}		161			191
	12			42			72]		102			132			162			192
11	13			43			73]		103			133			163			193
12	14			44			74]		104			134]		164			194
13	15			45			75]		105			135			165			195
	16			46			76]		106			136			166			196
14	17			47			77			107			137			167			197
15	18			48			78			108			138			168			198
	19			49			79			109			139			169			199
	20			50			80			110			140			170			200
	21			51			81			111			141			171			201
	22			52			82			112			142			172			202
	23			53			83]		113			143			173	1		203
	24			54			84]		114			144			174			204
	25			55			85			115			145			175			205
	26			56			86]		116			146			176			206
	27			57			87]		117			147			177			207
	28			_58			88			118			148			178			208
	29			59			89]		119			149			179			209
	30			60			90			120			150			180			210